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Attention: Medicaid Physicians, Pharmacies, FQHC,
RHC, and Nursing Homes

Effective October 1, 2004, the Alabama Medicaid Agency will require prior authorization (PA) for payment of non-preferred brands in the following drug classes:

Alzheimer Agents
Diabetic Agents
Skin and Mucous Membrane Agents
Proton Pump Inhibitors

The PA request form can be found on the Agency website at www.medicaid.state.al.us, and should be utilized by the prescribing physician or the dispensing pharmacy when requesting a PA. According to regulations, requests may be called in, faxed or mailed to:

Health Information Designs (HID)
Medicaid Pharmacy Administrative Services
P. O. Box 3210
Auburn, AL 36832-3210
Fax: 1-800-748-0116
Phone: 1-800-748-0130

Incomplete PA requests or those failing to meet Medicaid criteria will be denied. If the prescribing physician believes medical justification should be considered, the physician must document this on the form or submit a written letter of medical justification along with the prior authorization form. Additional information may be requested. Staff physicians will review this information.

Policy questions concerning this provider notice should be directed to the Pharmacy Program at (334) 242-5050. Questions regarding prior authorization procedures should be directed to the HID help desk at 1-800-748-0130.

September 3, 2004



P.O. Box 244032
Montgomery AL 36124-4032